Monthly

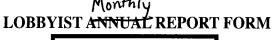


State of Idaho

Ben Ysursa Secretary of State

Boise, ID 83720-0080

Phone: (208) 334-2852 Fax: (208) 334-2282



To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

7 FEB 12 PM 3: 09 STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Matt Compton
1810 w. State st # 119 year ending 2-7-07 (Mo.) (Day) (Yr.) Boise 10 83762 61 31 07 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure * Total Amount for Reimbursed Personal Living and Travel Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity All Employers Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Do Not Have to be Reported Entertainment s 2500 Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services \$ 2500 \$ 2500 Total *When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1 The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. Item Names of Legislators & Public Officials in Group Place Date Amount Continued on attached page(s) Item Employer(s) Name(s) and Address(es) **INSTRUCTIONS** Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code. Filing deadline: Annual report is due on January 31st. No.2 TO BE FILED WITH: Ben Ysursa No.3 Secretary of State PO Box 83720

No.4

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.								
-	E	Date Amo		nt		Name of Legislator Receiving or Benefited			
			Ø						
Item 5	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.				LEGISLATIVE SUBJECT IDENTIFICATION Code Subject Code Subject				
Subject Code (from table)		Bill, Resolution or Other Legislative Ident. Number		Appropriation Bill Number and Section Number	- 01 Agriculture, horticulture, farming, and livestock		17	Health service, medicine, drugs and controlled substances, health	
01			72	and Section Pulmoet	02 03 04	Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth,	18 19 20	insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance)	
01		407	4		05 06 07	senior citizens Church and religion Consumer affairs Ecology, environment, pollution,	21	Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons	
01		5100 5100			08 09	conservation, zoning, land and water use Education Elections, campaigns, voting, political parties	23 24 25 26	License, permits Liquor Manufacturing, distribution and services Natural resources, forest and	
20	,	5108	lo	,	10	Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	27 28	forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance,	
26		1010		·	12 13 14 15 16	Government, county Government, federal Government, municipal Government, special districts Government, state	29 30 31	workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)	
						Employer No. 2 signature Employer No. 3 signature		2-8-07 Date 0-8-07 Date Date	
CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.						Employer No. 4 signature		Date	